



General Permit Registration Form for the Discharge of Domestic Sewage

Print or type unless otherwise noted. You must also submit the *Permit Application Transmittal Form* (DEP-APP-001) and the registration fee along with this form.

DEP USE ONLY

Application No. _____

Permit No. _____

Facility ID# _____

Part I: Registration Type

This registration is for (check one):

- ☐ A *new* registration
- ☐ A *renewal* of an existing registration

Please identify any previous or existing permit/authorization/registration number in the space provided.

Existing permit or registration number:

GDS

Part II: Fee Information

Note: Effective August 21, 2003 a fee of \$500.00 is to be submitted with *each* registration that you are submitting. The fee for municipalities is 50% of the above listed rate. The registration will not be processed without the fee.

Part III: Registrant Information

1. Fill in the name of the applicant/registrant(s) as indicated on the *Permit Application Transmittal Form* (DEP-APP-001):

Registrant:

Business Phone:

ext.

Fax:

- ☐ Check here if there are co-registrants. If so, label and attach additional sheet(s) with the required information to this sheet.

2. List primary contact for departmental correspondence and inquiries, if different than the registrant.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Contact Person:

Title:

Part IV: Site Information

1. Name of facility:

Street address or description of location of discharge to a sanitary sewer:

City/Town:

2. Average Daily Flow _____ gallons per day

Include, as Attachment A, the calculations indicating how this value was determined.

Part IV: Site Information (continued)

3. Name of Publicly Owned Treatment Works (sewage treatment plant) receiving discharge:
4. Is this discharge from a community sewerage system? ☐ Yes ☐ No
- If yes, include, as Attachment B, a Community Sewerage System Agreement.

Part V: Supporting Documents

Please check the box by the attachments being submitted as verification that *all* applicable attachments have been submitted with this registration form. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be sure to include the registrant's name as indicated on the *Permit Application Transmittal Form*.

- ☐ Attachment A: Average Daily Flow Calculation
- ☐ Attachment B: Community Sewerage System Agreement, if applicable

Part VI: Registrant Certification

The applicant *and* the individual(s) responsible for actually preparing the application must sign this part. An application will be considered incomplete unless all required signatures are provided. If the applicant is the preparer, please mark N/A in the spaces provided for the preparer.

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute.

I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text."

Signature of Applicant

Date

Name of Applicant (print or type)

Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Note: Please submit the Permit Application Transmittal Form, Registration Form, Fee, and all Supporting Documents to:

CENTRAL PERMIT PROCESSING UNIT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127